EXHIBIT 36

Participant must provide all of the information below in English:

1. Participant's	s contact information, including email address, and that of its counsel,
if any:	- P - 71
Participant's Name:	Jesus Joper Mazario
Participant's Address:	# 1913 calle Za Milkgross, Porce, f. f. 00730
Participant's Email Address	S: Jesmarg 2008@ Jahoo. Com
Name of Counsel:	Herman D. Bayer
Address of Counsel:	250 Manos Livera - Ave. Suite 800
Email Address of Counsel:	San Juan, F.R. 108918-1813
2. Participant's	Claim number and the nature of Participant's Claim:
Claim Number:	17 BK 3283- LTS
Nature of Claim:	the proposed of adjusted
By:	Jun
Signature	
Jesis Lopez	Mazarir
Print Name	
Title (if Participant i	s not an individual)
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<u>Instructions for Filing Notice of Participation</u>: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are <u>not</u> represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Participant's contact information, including email address, and that of its counsel,

Participant must provide all of the information below in English:

1.

if any: Participant's Name: Participant's Address: Participant's Email Address: Margacolog yahao. Com Name of Counsel: Munoz Rivera Ave. Suite 800 Address of Counsel: Q, R, 00918—18 Email Address of Counsel: Participant's Claim number and the nature of Participant's Claim: 2. Claim Number: Nature of Claim: Title (if Participant is not an individual)

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